

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Imperation of: David Jonathan Madge et al.

Application No. 10/658,971 Filed: September 9, 2003 Confirmation No. 3998

For: BORONIC ACID SALTS USEFUL IN

PARENTERAL FORMULATIONS

Examiner: To be assigned

Art Unit: 1615

Attorney Reference No. 6613-66749

COMMISSIONER FOR PATENTS P.O. BOX 1450 ALEXANDRIA, VA 22313-1450

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I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney

for Applicant(s

Date Mailed February 20, 2004

TRANSMITTAL LETTER

Enclosed for filing in the application referenced above are the following:

- ✓ Information Disclosure Statement✓ Form PTO-1449 and references cited thereon
- The Director is hereby authorized to charge any additional fees that may be required, or credit over-payment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

Bv

Wayne W. Ruper

Registration No. 34,420

One World Trade Center, Suite 1600

121 S.W. Salmon Street Portland, Oregon 97204

Telephone: (503) 226-7391 Facsimile: (503) 228-9446

cc: Docketing

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: David Jonathan Madge et **Application No. 10/658,971**

Filed: September 9, 2003 Confirmation No. 3998

BORONIC ACID SALTS USE

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INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 C.F.R. § 1.97(b)(3)

COMMISSIONER FOR PATENTS P.O. BOX 1450 ALEXANDRIA, VA 22313-1450

Listed on the accompanying form PTO-1449 and enclosed herewith are several English-language documents. Applicants respectfully request that these documents be listed as references cited on the issued patent.

Applicants filed this Information Disclosure Statement ("IDS") before the mailing date of a first Office action on the merits. As a result, no fee should be required to file this IDS. However, if the Patent Office determines that a fee is required for Applicants to file this IDS, please charge any such fees, or credit overpayment, to Deposit Account No. 02-4550. A duplicate copy of this Information Disclosure Statement is enclosed.

The filing of this IDS shall not be construed to be an admission that the information cited in the statement is, or is considered to be, prior art or otherwise material to patentability as defined in 37 C.F.R. §1.56.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

Registration No. 34,420

One World Trade Center, Suite 1600 121 S.W. Salmon Street Portland, Oregon 97204 Telephone: (503) 226-7391

Facsimile: (503) 228-9446

INFORMATION DISCLOSURES ATEMENT BY APPLICANT

Attorney Docket Number	6613-66749		
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First Named Inventor	David Jonathan Madge		
Art Unit	1615		
Examiner Name	To be assigned		
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Examiner's Initials*	Cite No. (optional)	Number	Date	Name
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EXAMINER SIGNATURE:	DATE CONSIDERED:

^{*} Examiner: Initial if reference considered, whether or not in conformance with MPEP 609. Draw line through cite if not in conformance and not considered. Include copy of this form with next communication to applicant.

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